

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application of: Confirmation No.: 9740  
 Claes WALLEN Date: October 20, 2009  
 Serial No.: 10/520,724 Group Art Unit: 3767  
 Filed: April 15, 2005 Examiner: Elizabeth Macneill  
 For: DEVICE FOR INJECTING MEDICAL SUBSTANCES

**VIA EFS-WEB**

Commissioner for Patents  
 P.O. Box 1450  
 Alexandria, VA 22313-1450

**AMENDMENT/SUBMISSION**

Sir:

This is a response to the Office Action mailed July 20, 2009 in the above-identified application. Reconsideration of the application is respectfully requested.

**FEE CALCULATION**

Any additional fee required has been calculated as follows:

\_\_\_ If checked, "Small Entity" status is claimed.

	No. Claims After Amendment		Highest No. Previously Paid For		Extra Present		Rate	ADDIT. FEE
TOTAL	9	MINUS	20	* =	0	X	(\$26 SE or \$52)	\$ 0.00
INDEP	3	MINUS	3	** =	0	X	(\$110 SE or \$220)	\$ 0.00
First Presentation of Multiple Dependent Claim						X	(\$195 SE or \$390)	\$ 0.00
* not less than 20 ** not less than 3							TOTAL	\$ 0.00

If any additional payment is required, a check which includes the calculated fee of \$  
 (Our Check No. \_\_\_\_\_) is attached.

In the event the actual fee is greater than the payment submitted or is inadvertently not enclosed or if any additional fee during the prosecution of this application is not paid, the Patent Office is authorized to charge the underpayment to Deposit Account No. 15-0700.

## **SUMMARY OF AMENDMENTS**

1. \_\_\_\_ If checked, an abstract (an amended abstract) is submitted herewith.
2. \_\_\_\_ If checked, amendment(s) to the drawings are submitted herewith.
3. \_\_\_\_ If checked, amendment(s) to the specification are submitted herewith.
4. X If checked, amendment(s) to the claims are submitted herewith.